DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION					Attorney Docket Number	MC040				
					First Named Inventor	Cote, Bernard, et al				
					COMPLETE IF KNOWN					
	(37 CFR 1.63)				Application Number		Ź			
X	Declaration Submitted	Submitted Submitted With Initial OR Filing (Declaration Submitted after Initial	Filing Date						
	with Initial Filing			Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit					
				required)	Examiner Name		7			

As a below named inventor, I hereby declare that:											
My residence, post office address, and citizenship	are as sta	ated below next to my name.									
I believe I am the original, first and sole inventor	(if only o	ne name is listed below) or a	n original, first and joint inver	itor (if plural							
names are listed below) of the subject matter whi	ch is clain	ned and for which a patent is	sought on the invention entitle	ed:							
DI-ARYL-SUBSTITUTED-ETHANE PYRIDONE	E PDE4 IN	HIBITORS									
the specification of which	a	itle of the Invention)									
bears the Attorney Docket Number and Title	of the Inv	rention noted above									
OR											
is attached hereto OR											
was filed on (MM/DD/YYYY) as United States Application Number or PCT International											
		nded on (MM/DD/YYYY)		plicable).							
I hereby state that I have reviewed and understand amended by any amendment specifically referred		ents of the above identified sp	ecification, including the clai	ms, as							
I acknowledge the duty to disclose to the Patent a as defined in 37 CFR 1.56, including for continuation											
the filing date of the prior application and the nat											
I hereby claim foreign priority benefits under 35 U											
certificate(s), or 365(a) of any PCT international a America, listed below and have also identified below.											
or of any PCT international application having a filing date before that of the application on which priority is claimed.											
Prior Foreign Application Number(s) Country		Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed? YES NO							
Training (c)		(Transfer of the state of the st								
		<u> </u>									
											
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:											
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.											
Application Number(s)		Filing Date (MM/DD/YYYY)	Attorney Docket Number								
60/393,281	07/02/20	02	MC040PV								
		A A									
											

- DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S designating the United States of America is not disclosed in the prior United State 35 U.S.C. 112, I acknowledge the duty 37 CFR 1.56 which became available bedate of this application.	a, listed below and, inses or PCT international to disclose information etween the filing date	sofar as the subj I application in t I known to me to	ject matter o the manner o be materia	of each of the provided by the last to patentable	claims of this application he first paragraph of lity as defined in					
U.S. Parent Application or PCT I Application Number	Parent	Parent Fili (MM/DD/			Parent Patent Number (if applicable)					
	-	(11111111111111111111111111111111111111	,		(if applicable)					
										
		····								
Additional U.S. or PCT international ap										
As a named inventor, I hereby appoint, respet following registered practitioner(s) to prosec	ctively and individually, a ute this application and to	as my attomey(s) transact all busin	or agent(s) w ness in the Ur	rith full power on ited States Pat	of substitution and revocation, the ent and Trademark Office					
connected therewith:	er Number				ce Customer Number					
☐ OR	ed practitioner(s) name/re	egistration numbe	m listed below	Bar	r Code Label here					
Name	Registration	egistration numbe		-	Registration					
	Number		Nan	ne 	Number					
Curtis C. Panzer	33,752									
										
Direct all correspondence to: X Cust	omer Number or Bar C	ode Label	#0002	10						
Name Curtis C. Panzer										
Address Merck & Co., Inc Patent	Department									
Address P.O. Box 2000, RY60-30										
City Rahway		State NJ		ZIP	07065-0907					
Country USA	Telephone	(732)594-3199		Fax	(732)594-4720					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
Name of Sole or First Inventor:		A petition has been filed for this unsigned inventor								
Given Name (first and mide	lle [if any])	Family Name or Surname								
Bernard	\bigcirc	Cote								
Inventor's Signature	<u>.C.J.</u>		I	Date A	tpril 7,2003					
Residence: Ile-Perrot NoTRE-DAM L'ILE- PER	ROT State Quebec	Country	CANADA	Citi	zenship Canadian					
Post Office Address Merck & Co., Inc.,	P.O. Box 2000									
City Rahway		State	NJ	ZIP	07065-0907					
Additional inventors are being named on	the supplemental A	Additional Invento	ors(s) sheet(s)	PTO/SB/02A a	ttached hereto.					

Proase type a plus sign (+) inside this box +

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

ame of Additional Joint Inventor, if any:						A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])								Fai	mily Nar	ne or	Surnan	ne		
	Nam	e (1118) and middle [11	<u> </u>		Mar	rtins								
inventor's Rock of Markins									Date	Sp	uil	4,	2003	
Residence: Vandreuil			State	Quebec	Country CANAI		ANAD	ADA C		Citizenship Canadian				
ty ost Office ddress	I	Merck & Co., Inc., P.O.	Box 200	0										
ity	1	Rahway		Sta					ZIP ———	07065-0907				
ame of Addition	nal Joi	int Inventor, if any:				A pe	tition		en filed fo				rentor	
Give	n Nar	me (first and middle [if	any])		-			Fa	amily Na	me or	Surna	me		
nventor's					D		Date							
Signature Residence:			State			Coun	try			Citiz	enship	,		
City Post Office Address	1	Merck & Co., Inc., P.O.	Box 20	000										
City	_	Sta		ate NJ			ZIP		07065-0907					
		oint Inventor, if any:				A petition has been filed for this unsigned inventor Family Name or Surname								
Giv	en Na	ame (first and middle [if any])	<u> </u>		ramily Name of Surfame								
Inventor's Signature						Date								
Residence: City			Stat	e		Country				Citi	izenshi	р		
Post Office Address		Merck & Co., Inc., P.C). Box 2	.000			1							
City		Rahway			St	ate	NJ		ZIP		07065-0			
Name of Additional Joint Inventor, if any:						A petition has been filed for this unsigned inventor Family Name or Surname								
Given Name (first and middle [if any])						Family Name of Sumame								
Inventor's Signature					1				Date	2				
Residence: City			Sta	te		Country				Ci	tizensh	nip		
Post Office Merck & Co., Inc., P.O. Box 2000									<u> </u>					
City				s	tate	NJ		ZIP		07065-	0907			